24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Leadership Fund	C C00571703
Check if 24-hour report 48-hour report New report Amends report	filed on fil
Full Name of Payee Main Street Media	Date of Public Distribution/Dissemination
	10 04 2016
Mailing Address P.O. Box 25093	Amount
City State Zip Code	1900564.70
Alexandria VA 22313	Transaction ID : SE1 Date of Disbursement or Obligation
Purpose of Expenditure TV/Media Placement Category/ Type	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
McGinty, Kathleen, Alana, ,	President State: PA
Calcillati Ical Ic Batc	Disbursement For: Primary
Full Name of Payee Main Street Media	Date of Public Distribution/Dissemination
	10 04 2016
Mailing Address P.O. Box 25093	Amount
City State Zip Code	189796.37
Alexandria VA 22313	Transaction ID : SE2 Date of Disbursement or Obligation
Purpose of Expenditure Radio Placement Category/ Type	09 / 30 / Y 2016
Name of Federal Candidate Support	Office Sought: House District:
McGinty, Kathleen, Alana, ,	President Senate State: PA
	Disbursement For: Primary General Other (specify) General
(a) SUBTOTAL of Itemized Independent Expenditures	2090361.07
(b) SUBTOTAL of Unitemized Independent Expenditures	•
(c) TOTAL Independent Expenditures	·
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Crosby, Caleb, , , [Electronically Filed] Date	10 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Leadership Fund	C C00571703
Check if 24-hour report 48-hour report New report Ame	ends report filed on
Full Name of Payee Arena Online	Date of Public Distribution/Dissemination
	10 / 04 / 2016
Mailing Address 1780 Sequoia Vista Circle	Amount
City State Zip Code	365000.00
Salt Lake City UT 84104	Transaction ID : SE3
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Online Advertising Type	10 04 2016
	Support Office Sought: House District:
McGinty, Kathleen, Alana, ,	Oppose President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 4481118.35	Disbursement For: Primary X General
	Other (specify) >
Full Name of Payee DMM Media	Date of Public Distribution/Dissemination
Molling Address	10 / 04 / 2016
Mailing Address 1911 N. Fort Myer Drive	Amount
Ste 400 City State Zip Code	12410.67
Arlington VA 22209	Transaction ID : SE4 Date of Disbursement or Obligation
Purpose of Expenditure TY/Modic Production Category/	M M / D D / Y Y Y Y
TV/Media Production Type	10 04 2016
	Support Office Sought: House District:
McGinty, Kathleen, Alana, ,	Oppose President X Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 4481118.35	Disbursement For: Primary General 2016
r or Election to: Cimeo Cought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	377410.67
(4) 552 15 112 51 1611252 11212	3,771,00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported here with, or at the request or suggestion of, any candidate or authorized committee or party committee) any political party committee or its agent.	
Crosby, Caleb, , , [Electronically Filed]	Date 10 05 2016
Signature	Date 10 05 2016

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	JEINI EXI EN	DITOTILO		PAGE 3 OF 3 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼		
Senate Leadership Fund			С	C00571703		
Check if 24-hour report X 48-hour report	X New re	eport Amends repo	ort filed on	/ D = D / Y = Y = Y		
Full Name of Payee			Date of Pul	blic Distribution/Dissemination		
DMM Media			10	04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1911 N. Fort Myer Drive			Amount			
Ste 400						
City	State	Zip Code		2823.98		
Arlington	VA	22209		Transaction ID : SE5 Date of Disbursement or Obligation		
Purpose of Expenditure Radio Production		Category/ Type	10	/ 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate		Support	Office Sought:	House District:		
McGinty, Kathleen, Alana, ,		X Oppose	President	Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought		4481118.35	Disbursement For:	: Primary X General (specify) ▶		
Full Name of Payee				blic Distribution/Dissemination		
Richard Sales Media			10	04 2016		
Mailing Address 1702 E Highland Ave			Amount			
Suite 408			Amount			
City	State	Zip Code		2000.00		
Phoenix	AZ	85016	Transaction Date of Dis	n ID: SE6 sbursement or Obligation		
Purpose of Expenditure Web Ad		Category/ Type	10	04 Y 2016		
Name of Federal Candidate		Support	Office Sought:	House District:		
McGinty, Kathleen, Alana, ,		x Oppose	President	Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought		4481118.35	Disbursement For 2016 Other	: Primary X General (specify) ▶		
(a) SUBTOTAL of Itemized Independent Exper	nditures		>	4823.98		
(b) SUBTOTAL of Unitemized Independent Exp	oenditures		· •	7 1 7 1 7		
(c) TOTAL Independent Expenditures			·	2472595.72		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Crosby, Caleb, , ,	[Electro	onically Filed] Date	e 10 05			
3						